

COMBINED DECLARATION AND POWER OF ATTORNEY

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,
CONTINUATION, OR C-I-P)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is for an original application.

INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am an original, first and joint inventor of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

Knowledge Management System for Computer-Aided Design Modeling

SPECIFICATION IDENTIFICATION

The specification is attached hereto.

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56, and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent.

POWER OF ATTORNEY

I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

APPOINTED PRACTITIONER(S)

Bruce D. Sunstein
Robert M. Asher
Timothy M. Murphy
Steven G. Saunders
Karen A. Buchanan
Samuel J. Petuchowski
Jeffrey T. Klayman
John J. Stickevers
Elizabeth P. Morano
Jay Sandvos
Alexander J. Smolenski, Jr.
John L. Conway
Barbara J. Carter
Shaun P. Montana
Charlton Shen
Kenneth S. Sachar

REGISTRATION NUMBER(S)

27,234
30,445
33,198
36,265
37,790
37,910
39,250
39,387
42,904
43,900
47,953
48,241
52,703
54,320
54,442
54,418

I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

SEND CORRESPONDENCE TO

Jeffrey T. Klayman
125 Summer Street
Boston, MA 02110-1618
US
002101

DIRECT TELEPHONE CALLS TO:

Jeffrey T. Klayman
617-443-9292

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

David W. Vredenburgh
Inventor's signature _____

Date _____

Country of Citizenship _____

Residence

Post Office Address

Gregory J. Smith
Inventor's signature _____
Date _____ Country of Citizenship _____
Residence _____
Post Office Address _____

Robert J. Mattarn
Inventor's signature _____
Date _____ Country of Citizenship _____
Residence _____
Post Office Address _____